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81/23/2007 HMARZ12 00000014 10/29996

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/729,996	12/09/2003	Roger A. Benham	A-8849	2796

TITLE OF INVENTION: CATHODIC PROTECTION SYSTEM FOR METALLIC STRUCTURES

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID (SSIESEE	TOTAL FEE(S) DUE	70DATE DUE
nonprovisional	YES	\$700	\$300	50-C:1264	\$1000	01/23/2007
EXAM	IINER	ART UNIT	CLASS-SUBCLASS	]		
BELL, I	BRUCE F	1746	204-196360			
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).  Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.		<ul> <li>2. For printing on the patent front page, list</li> <li>(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,</li> <li>(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.</li> </ul>		era 2 Wassor	<pre>1_Hoffman, 2_Wasson &amp; 3_Gitler, P.C.</pre>	
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)  PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.  (A) NAME OF ASSIGNEE  (B) RESIDENCE: (CITY and STATE OR COUNTRY)						

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Authorized Signature	Date \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
Typed or printed name Mitchell B. Wassor	Registration No. 27,408

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